

## **Ride-Along Program**

**INTRODUCTION:** The Ride-Along Program provides an opportunity for approved individuals to experience fire service functions firsthand. It is the policy of the Idaho Falls Fire Department to provide an opportunity for citizens to experience fire service functions when specific criteria are met.

**ELIGIBILITY:** The ride-along program is offered to those individuals, involved with a recognized program (volunteer firefighter, EMS student, etc.), who have demonstrated a desire for a career in public safety. Every attempt will be made to accommodate interested persons; however, any applicant may be disqualified without cause.

Factors that may be considered in disqualifying an applicant include but are not limited to:

- Being under 18 years of age.
- Prior criminal history.
- · Pending criminal action.
- Pending lawsuit against the Department.
- Denial by any supervisor.
- Poor health or other condition that would negatively impact response.

PROCEDURE TO REQUEST A RIDE ALONG: Generally, ride-along requests will be reviewed and scheduled by the Fire Operations Chief or the authorized designee. The Fire Operations Chief or the authorized designee will schedule a date, based on availability, generally at least one week after the date of application. If approved, a copy will be forwarded to the respective Battalion Chief as soon as possible for his/her scheduling considerations. If the ride-along is denied, a representative of the Department will contact the applicant and advise him/her of the denial. Once approved, ride-alongs will be allowed to ride no more than once every six months. An exception may be made for the following: students, Explorers, chaplains, reserves, applicants, and others with approval of the Fire Operations Chief. An effort will be made to ensure that no more than one participant will participate in a ride-along during any given time period. Normally, no more than one ride-along will be allowed in the fire apparatus at a given time.

**REQUIREMENTS:** Prior to participating in a ride-along, every participant who may come into contact with private health-related information will be required to complete Health Insurance Portability and Accountability Act (HIPAA) training and sign a nondisclosure agreement to keep all confidential information learned during the ride-along confidential. Participants must meet eligibility requirements. Prior to participating in a ride-along, every person must acknowledge the risks and sign a written waiver of claims and release of liability. The participant must be in good health and must not be suffering from any illness or injury, including cold, flu, or respiratory infection, on the day of the ride-along. Candidates must be fully vaccinated for COVID and provide proof of vaccination.



**AVAILABILITY:** The ride-along program is available on most days of the week, with certain exceptions. The ride-along times are established by the Fire Operations Chief. Exceptions to this schedule may be made as approved by the Fire Chief, Fire Marshal, or the on-duty Battalion Chief.

**SUITABLE ATTIRE:** Any person approved to ride-along is required to be suitably dressed in a collared shirt, blouse or jacket, slacks, and shoes. Sandals, t-shirts, tank tops, shorts, and ripped or torn blue jeans are not permitted. Hats and ball caps will not be worn in the fire apparatus. Jewelry and tattoos should comply with the Personal Appearance Standards Policy. The Fire Operations Chief, Battalion Chief, or Captain may refuse a ride-along to anyone not properly dressed.

**FIREFIGHTER RIDE-ALONGS:** Members of any other fire service agency will not be permitted to ride-along with on-duty firefighters without the express consent of the Fire Operations Chief or the authorized designee. In the event that such a ride-along is permitted, the rider shall be allowed to participate in all fire service activities except as otherwise directed or as emergency circumstances may require.

**CONTROL OF RIDE-ALONGS:** The Captain shall maintain control over the ride-along at all times and instruct him/her in the conditions that necessarily limit participation. These instructions should include:

- a. The ride-along will follow the lawful directions of any department member.
- b. The ride-along will not become involved in any investigation, discussions with victims, or handling any fire equipment, unless approved by the supervising Captain.
- c. Either the ride-along or the Captain may terminate the ride at any time. Reasonable effort will be made to return the observer to his/her home or to the fire station if the ride is terminated.
- d. Captains will not allow ride-alongs to be present in any residence or situation that would jeopardize their safety or cause undue stress or embarrassment to a victim or any other citizen.
- e. Under no circumstance shall a ride-along be permitted to enter a private residence with the fire crew without the express consent of the supervising Captain.
- f. Supervising Captain shall ensure ride-alongs are in appropriate PPE.



#### **HIPAA Training**

HIPAA stands for Health Insurance Portability and Accountability Act. The act was passed in the early 1990's to regulate questionable policies and practices of health maintenance organizations and created privacy practice standards that the healthcare worker must follow. HIPAA provides patients with legal rights and voices in how healthcare groups/companies use the protected health information (PHI). PHI can be defined as any medical information concerning a patient identification such as name, ID number or any other means of identification. Because Emergency Medical Services (EMS) agencies operate in a field setting, HIPAA uses standards of reasonableness to address privacy and PHI.

Generally, patient privacy and PHI become an issue in the pre-hospital setting when loading a patient and access is not controlled. Personnel must focus on information requests going out, not coming in, as well as who is making the request. PHI may only be shared for treatment, payment or operational needs. Other requests require written consent from the patient. A minimum necessary information requirement is standard for all use of PHI outside of treatment. Treatment includes sharing PHI between a first responder, EMS personnel, emergency room staff, pharmacies and other in-kind parties and is transmitted by voice, paper, electronic/telecommunication means, EMS agencies, billing companies and guarantors.

Generally, valid requests for PHI from other public safety agencies may be granted keeping the best interest of the patient in mind. In many cases, EMS personnel must use professional judgement in granting such PHI requests. Valid requests for PHI include mandated requirements of law, public health activities, abuse/domestic situations, health oversight activities, judicial and administrative and law enforcement activities (process/covered by law, identification and location, victims of crime, deceased patients, crime on premises, reporting crime), deceased patients, tissue donation patients, research purposes, threat to public safety, specialized governmental functions and workers compensation. PHI must remain confidential for all other requests unless prior written authorization has been obtained from the patient; it cannot be released without written consent. One exception is information requested from family, friends or other individuals involved in care or payment arrangements for the patient. EMS personnel can grant limited requests with the approval of the patient or by using professional judgement when the patient is incapacitated.

Other areas of HIPAA include security requirements for computer storage and transmission of healthcare data along with insurance claim transaction requirements. Healthcare providers that charge for services such as EMS agencies and fire departments, all personnel who work or volunteer for such groups/agencies, and all companies and individuals acting on behalf of such groups/agencies must comply with HIPAA.

Regulations affect how EMS personnel use and transfer patient information and requires EMS agencies to appoint a Compliance Officer and create Standard Operating Procedures for the members to follow during patient care situations, when transporting patient information and for administrative functions. HIPAA mandates training of EMS personnel and administrative support staff. EMS agencies must also follow HIPAA rules in retaining, managing and releasing patient information/records. EMS agencies must abide by HIPAA regulations by notifying patients of their rights in a timely manner and request that each patient sign a statement acknowledging that he/she is aware of these rights. Enforcement of HIPAA regulations targets the healthcare provider and agency and may include civil and or criminal penalties for violating regulations.



## **HIPAA Case Study**

An individual was walking across an intersection and was hit by car. The vehicle was involved in motor vehicle accident just prior to striking the patient. EMS, fire and police all responded. The patient had multiple injuries, was unresponsive with open fractures of both legs, and had severe bleeding and deteriorating vitals. The fire and police departments were first on scene and began treating the patient in front of many bystanders that were helping the victim. Did a HIPAA violation occur? *No. The first responders needed to treat the patient in the environment found, no reasonable measures could be taken to assure privacy.* 

An ambulance crew arrives on scene and the first responders gives them a detailed report in front of bystanders. Did a HIPAA violation occur? *No. The first responders need to give critical information to the ambulance crew.* 

The ambulance crew loads the patient into the ambulance and starts treating the patient. A few minutes later a firefighter brings a priest over who says he knows the patient. The priest asks about the patient's condition and if the patient is going to die. Is this a HIPAA issue? Yes. The information request means PHI would be given out. The relationship between the patient and the priest would have to be verified.

A few minutes later a police officer brings an obviously upset woman to the ambulance who states that the victim is her son and asks what his condition is. Is this a HIPAA issue? *Yes. The information request means PHI would be given out.* 

The ambulance crew leaves the scene with the patient and gives a PHI radio report to dispatch. Is this a HIPAA issue? Yes. PHI was given out over the radio frequency which is accessible by media outlets and other individuals listening to emergency radio transmissions. The ambulance crew should use a cell phone when sharing PHI with dispatch and other radio users.

The ambulance crew arrives at the hospital and transfers care over to the hospital. While writing the patient report, a crew member from another department states, "Wow! That was a bad one, huh?" Did a HIPAA violation occur? Yes. Only healthcare providers directly involved with the call, supervisors or other administrative personnel should be reading or sharing PHI.

Police officers on the scene and at the hospital requested certain information including the patient identity and condition. They are requesting this information as part of a potential fatality investigation. Is it a HIPAA violation to provide this information? No. In the case of a potentially fatal motor vehicle accident, providing the police with certain information for the investigation is appropriate. This is a limited minimum necessary information requirement.

Several weeks later you are contracted by the patient's attorney who wants to talk with you about the incident and patient injuries. Is it a HIPAA violation to speak with this individual? *Possibly. Confirm the identification and make sure he/she has authorization as the patient representative. This is better handled with a subpoena for deposition or trial.* 



### **HIPAA Nondisclosure Agreement**

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 limits departmental disclosure of the protected health information of any patient to specific uses such as the provision of treatment or other health care services, for billing and payment purposes, and for health care operational purposes. Additionally, the department is authorized to release health information for a number of specialized purposes (to assist in the prevention or control of public health risks, selected assistance to law enforcement agencies, assistance to federal officials in the interests of national security, etc.).

As a participant in the department's Ride-Along Program, you are specifically prohibited from discussing individual patients, their treatment, and any other information that could be utilized to identify these patients with anyone except those departmental personnel who will be conducting your ride-along activities. Any disclosure of patient information as detailed above may subject you to civil and/or criminal penalties as prescribed by law.

Should special circumstances necessitate that you utilize or disseminate such information (e.g. school reports, patient reports); the EMS Division Chief will assist you in ensuring that the material is in such form that it cannot be utilized to identify a specific incident. No health-related information may be utilized without review and subsequent authorization of the Fire Chief or his/her designee.

As a participant in the Idaho Falls Fire Department Ride-Along Program, I understand the restrictions outlined above and I agree to abide by the requirements of this agreement. I understand that I may be subject to civil or criminal penalties should I violate the prohibitions set form in the Health Insurance Portability and Accountability Act of 1996.

| Ride-Along Participant/Guardian Signature | Date     |  |
|---|----------|--|
| Printed Name of Ride-Along Participant    |          |  |
| Witness                                   | <br>Date |  |



# Waiver of Claims & Release of Liability

| Name:    | Date:  |
|----------|--|
| Addres   | ss: Phone:   |
| Affiliat | ion:   |
| Please   | read and initial.  |
| 1.       | I am 18 years of age or older.   |
|          | I do not have a criminal history.  |
|          | I do not have pending criminal action.   |
| 4.       | I do not have a pending lawsuit against the Department.  |
| 5.       | I am in good health and not suffering from any illness or injury, including cold, flu, or                |
|          | respiratory infection.   |
| 6.       | I understand and agree that my services are voluntary in nature and that no benefits or                  |
|          | remuneration shall be received.  |
| 7.       | I am current on Heptavax immunizations or have started the prescribed series of                          |
|          | vaccinations.  |
|          | I have current HCV, influenza, tetanus and PPD test.   |
|          | I have been fully vaccinated for COVID and have proof of vaccination.                                    |
| 10.      | I agree to indemnify and hold harmless the City of Idaho Falls and its officers and                      |
|          | employees from all claims, actions, suits or damages of any kind, including cost and attorney fees, for  |
|          | any damage(s) to third parties while participating in this observation (Ride-Along Program), and to hold |
|          | harmless the City of Idaho Falls, its officers and employees from any suit or action arising from an     |
|          | accident or injury while in the course of participating in the observation (Ride-Along Program).         |
| 11.      | I have read the HIPAA Training provided and signed the HIPAA non-disclosure agreement.                   |
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